Fill in this information to identify your case:		4419
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture	Michele First name  Y Middle name	First name  Middle name
	identification to your meeting with the trustee.	McCallum-Evans Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Michele McCallum	
	Include your married or maiden names.	Michele Evans	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7846	

Deb	otor 1 Michele Y McCallu	ım-Evans	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	used in the last 8 years	,	,		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		21 S. 32rd Street Wyandanch, NY 11798			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Suffolk	0		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Deb	otor 1 Michele Y McCallu	ım-Evans	S			Case number (if known)	
Par	t 2: Tell the Court About	our Bank	cruptcy Case	е			
7.	The chapter of the Bankruptcy Code you are				ich, see <i>Notice Required by</i> a 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for te box.	Bankruptcy
	choosing to file under	☐ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		■ Chap	ter 13				
8.	How you will pay the fee	abo	out how you	may pay. Typically ttorney is submitting	, if you are paying the fee yo	ck with the clerk's office in your local court fo ourself, you may pay with cash, cashier's ch alf, your attorney may pay with a credit care	neck, or money
						on, sign and attach the Application for Indiv	iduals to Pay
The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you but is not required to, waive your fee, and may do so only if your income is applies to your family size and you are unable to pay the fee in installments						our income is less than 150% of the official	poverty line that
						cial Form 103B) and file it with your petition	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	-		District		When	Case number	
			District				
			District _		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to line	e 12.			
	i coluctive :	☐ Yes.	Has your	r landlord obtained	an eviction judgment agains	st you and do you want to stay in your resid	ence?
				No. Go to line 12.			
				Yes. Fill out <i>Initial</i> Spankruptcy petition.		Judgment Against You (Form 101A) and file	e it with this

Deb	otor 1 Michele Y McCallu	ım-Evans	3		Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Owr	as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you ir s, cash-f	ndicate that you are a low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs		If immed	diate attention is	
	immediate attention?		needed,	why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	<b>5</b> , -				Number, Street, City, State & Zip Code

Debtor 1 Michele Y McCallum-Evans Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Michele Y McCallum-Evans				Case number (if known)				
Par	t 6: Answer These Quest	ions for Repo	rting Purposes					
16.	What kind of debts do you have?		e your debts primarily consundividual primarily for a personal,		ned in 11 U.S.C. § 101(8) as "incurred by an			
			<ul><li>No. Go to line 16b.</li><li>■ Yes. Go to line 17.</li></ul>					
			<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. St	ate the type of debts you owe the	at are not consumer debts or busines	ss debts			
17.	Are you filing under Chapter 7?	■ No. I a	m not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and			u estimate that after any exempt prope to distribute to unsecured creditors?	erty is excluded and administrative expenses			
	administrative expenses		No					
	are paid that funds will be available for		Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>1</b> -49		☐ 1,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$50,0	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,001 -		□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
		\$100,001		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500,001	- \$1 million	<b>—</b> \$100,000,001 \$000 Hillion	- Wore than \$60 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$50,		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?	\$50,001	·	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		■ \$100,001 □ \$500,001		□ \$100,000,001 - \$100 million	☐ More than \$50 billion			
			<b>*</b>					
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				aware that I may proceed, if eligible, vailable under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.			
				y or agree to pay someone who is no ce required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this			
		I request reli	ef in accordance with the chapte	er of title 11, United States Code, spec	cified in this petition.			
					or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Michele	Y McCallum-Evans	0'				
		Michele Y Signature of	<b>McCallum-Evans</b> Debtor 1	Signature of Debto	r 2			
		Executed on		Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

Debtor 1 Michele Y McCallu	um-Evans	Case number (if known)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petitio under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h	ites Code, and have ex	xplained the relief available under each chapter		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certi schedules filed with the petition is incorrect.	fy that I have no knowl	ledge after an inquiry that the information in the		
	/s/ Ronald D. Weiss	Date	September 26, 2016		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Ronald D. Weiss				
	Printed name				
	Ronald D. Weiss, P.C.				
	Firm name				
	734 Walt Whitman Road				
	Suite 203				
	Melville, NY 11747  Number, Street, City, State & ZIP Code				
	Number, Street, City, State & ZIP Code				
	Contact phone (631) 271-3737	Email address	weiss@ny-bankruptcy.com		
	4419				
	Bar number & State		<del></del>		

Fill	in this information	on to identify your	case:				4419
Deb	otor 1 N	lichele Y McCallu	ım-Evans				
D-1		rst Name	Middle Name	Last Name			
	otor 2 use if, filing) Fi	rst Name	Middle Name	Last Name			
Uni	ted States Bankru	otcy Court for the:	EASTERN DISTRICT C	DF NEW YORK			
	se number						
(if kn	own)					_	k if this is an nded filing
					<u> </u>	G	.acag
Of	ficial Form	106Sum					
			ınd Liabilities ar	nd Certain Statistical Informa	ation		12/15
Be a	s complete and a	accurate as possib	e. If two married peoples first; then complete the	e are filing together, both are equally respone information on this form. If you are filing the box at the top of this page.	onsible fo		
Par		Your Assets					
		7.00.7.000.0				Your :	assets
							of what you own
1.		Property (Official Fo				\$	244,576.00
						· · ·	·
	1b. Copy line 62	, Total personal prop	perty, from Schedule A/B			\$	15,939.00
	1c. Copy line 63,	Total of all property	on Schedule A/B			\$	260,515.00
Par	t 2: Summarize	Your Liabilities					
							iabilities
						Amou	nt you owe
2.			aims Secured by Property nn A, Amount of claim, at	ho (Official Form 106D) the bottom of the last page of Part 1 of <i>Sche</i>	dule D	\$	282,208.39
3.			Unsecured Claims (Official (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	5,502.00
	3b. Copy the tot	al claims from Part 2	2 (nonpriority unsecured c	claims) from line 6j of Schedule E/F		\$	44,757.30
				Your total I	iabilities	\$	332,467.69
Par	t 3: Summarize	Your Income and	Expenses				
4.		Income (Official Foined monthly income		<i>-</i>		\$	4,715.61
5.		r Expenses (Official nly expenses from lin				\$	3,963.00
Par	t 4: Answer Th	ese Questions for	Administrative and Stat	istical Records			
6.		• •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the cou	rt with you	ır other so	chedules.
7.	■ Yes What kind of de	bt do you have?					
				debts are those "incurred by an individual pring for statistical purposes. 28 U.S.C. § 159.	marily for a	a persona	I, family, or
	☐ Your debts	•	consumer debts. You ha	ve nothing to report on this part of the form. (	Check this	box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Michele Y McCallum-Evans

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,321.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,502.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	17,644.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	23,146.00

Debtor 1	Michele Y M	cCallum-Evans	Name	Last Name			
Debtor 2	ristrano	Middle	Traine	Edot Namo			
Spouse, if filing)	First Name	Middle	Name	Last Name			
Inited States	Bankruptcy Court for	the: EASTERN	DISTRICT OF NEW	YORK			
Case number							☐ Check if this is
				<del></del>			amended filing
Official F	Form 106A/B	<u>.</u>					
chedi	ule A/B: Pr	operty					12/1
each categor	y, separately list and d	escribe items. List a	an asset only once. If	an asset fits in more than	one category, lis	st the asset in	the category where ye
				ole are filing together, both the top of any additional pa			
swer every q		attach a separate si	ieet to this form. On t	ne top of any additional pa	jes, write your i	iaine and case	number (ii known).
art 1: Descri	ibe Each Residence. Bu	uilding. Land. or Oth	her Real Estate You O	own or Have an Interest In			
	•	<u> </u>					
Do you own	or have any legal or eg	uitable interest in a					
	or nave any legal or eq	ultable iliterest ili a	ny residence, building	g, land, or similar property?	•		
☐ No. Go to	, , , ,	unable interest in a	ny residence, building	g, land, or similar property?	•		
_	, , , ,	unable interest in a	ny residence, building	g, land, or similar property?			
_	Part 2.	uitable liiterest ili a	ny residence, building	g, land, or similar property <sup>r</sup>			
_	Part 2.	ultable iliterest ili a	ny residence, building	g, land, or similar property′			
Yes. Whe	Part 2.	ultable iliterest ili a		g, land, or similar property?  'ty? Check all that apply			
Yes. Whe	Part 2.	ultable lilterest ili a		ty? Check all that apply		luct secured cla	ims or exemptions. Pu
Yes. Whe	Part 2. ere is the property?		What is the proper  ■ Single-family	ty? Check all that apply	Do not ded the amount	t of any secured	l claims on <i>Schedule D</i>
Yes. Whe	Part 2. ere is the property?  2rd Street		What is the proper  ■ Single-family  Duplex or mi	r <b>ty?</b> Check all that apply y home	Do not ded the amount	t of any secured	
Yes. Whe	Part 2. ere is the property?  2rd Street		What is the proper  Single-family  Duplex or more Condominium	rty? Check all that apply y home ulti-unit building m or cooperative	Do not ded the amount	t of any secured	l claims on <i>Schedule D</i>
Yes. Whe	Part 2.  Pere is the property?  Pard Street  Pard Street  Pard Street  Pard Street  Pard Street  Pard Street		What is the proper  Single-family  Duplex or more Condominium	t <b>y?</b> Check all that apply / home ulti-unit building	Do not ded the amount	t of any secured Who Have Clain	l claims on <i>Schedule D</i>
Yes. When the Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes	Part 2.  Pere is the property?  Pard Street  Pard Street  Pard Street  Pard Street  Pard Street  Pard Street	<u>cription</u>	What is the proper  ■ Single-family  □ Duplex or m  Condominium  □ Manufacture	rty? Check all that apply / home ulti-unit building m or cooperative ed or mobile home	Do not ded the amount Creditors V	t of any secured Who Have Clain	I claims on Schedule L ns Secured by Property Current value of the
Yes. When the Ye	Part 2. Pere is the property?  Pard Street Pere is the property?  Pard Street Pard Street Pere is the property?  Pard Street	cription 11798-0000	What is the proper  Single-family Duplex or more Condominium Manufacture Land Investment p	rty? Check all that apply / home ulti-unit building m or cooperative ed or mobile home	Do not ded the amount Creditors V  Current va entire prop	t of any secured who Have Clain alue of the perty?	Current value of the portion you own?
Yes. When the Ye	Part 2. Pere is the property?  Pard Street Pere is the property?  Pard Street Pard Street Pere is the property?  Pard Street	cription 11798-0000	What is the proper  Single-family Duplex or many Condominium Manufacture Land Investment p Timeshare Other	rty? Check all that apply y home ulti-unit building m or cooperative ad or mobile home	Do not ded the amount Creditors V  Current va entire prop \$22  Describe t (such as fe	t of any secured who Have Clain alue of the perty?  44,576.00 he nature of your simple, tena	I claims on Schedule E as Secured by Property Current value of the portion you own?
Yes. When the Ye	Part 2. Pere is the property?  Pard Street Pere is the property?  Pard Street Pard Street Pere is the property?  Pard Street	cription 11798-0000	What is the proper  Single-family Duplex or more Condominium Manufacture Land Investment properties are Other Who has an interes	rty? Check all that apply y home ulti-unit building m or cooperative d or mobile home property st in the property? Check one	Do not ded the amount Creditors V  Current va entire prop  \$24  Describe t (such as for a life estate)	t of any secured who Have Clain alue of the perty?  44,576.00 he nature of your simple, tenate), if known.	Current value of the portion you own? \$244,576. Surroundership interes
Yes. When the Ye	Part 2. Pre is the property?  2rd Street ess, if available, or other des  anch  NY  State	cription 11798-0000	What is the proper  Single-family Duplex or mi Condominium  Manufacture Land Investment p Timeshare Other Who has an interes	rty? Check all that apply y home ulti-unit building m or cooperative ad or mobile home property st in the property? Check one	Do not ded the amount Creditors V  Current va entire prop \$22  Describe t (such as fe	t of any secured who Have Clain alue of the perty?  44,576.00 he nature of your simple, tenate), if known.	Current value of the portion you own? \$244,576. Surroundership interes
Yes. When the Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes	Part 2. Pre is the property?  2rd Street ess, if available, or other des  anch  NY  State	cription 11798-0000	What is the proper  ■ Single-family  □ Duplex or m  Condominium  □ Manufacture  □ Land □ Investment p □ Timeshare □ Other  Who has an intered □ Debtor 1 only □ Debtor 2 only	rty? Check all that apply y home ulti-unit building m or cooperative ad or mobile home property st in the property? Check one	Do not ded the amount Creditors V  Current va entire prop \$24  Describe t (such as fe a life estat Jointly (	t of any secured who Have Clain alue of the perty?  44,576.00 he nature of your ee simple, tenate), if known.  Dwned	Current value of the portion you own? \$244,576.  Sour ownership interestincy by the entireties
Yes. When the Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes	Part 2. Pre is the property?  2rd Street ess, if available, or other des  anch  NY  State	cription 11798-0000	What is the proper  Single-family Duplex or more Condominium  Manufacture Land Investment proper Timeshare Other Who has an interest Debtor 1 only Debtor 2 only	rty? Check all that apply / home ulti-unit building m or cooperative ad or mobile home property st in the property? Check one y	Do not ded the amount Creditors V  Current va entire prop \$24  Describe t (such as fe a life estat Jointly (	t of any secured who Have Clain alue of the perty?  44,576.00 he nature of your ee simple, tenate), if known.  Dwned	Current value of the portion you own? \$244,576. Surroundership interes
Yes. When the Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes	Part 2. Pre is the property?  2rd Street ess, if available, or other des  anch  NY  State	cription 11798-0000	What is the proper  Single-family Duplex or more Condominium Manufacture Land Investment proper Other Who has an interest Debtor 1 only Debtor 1 and At least one	rty? Check all that apply y home ulti-unit building m or cooperative ed or mobile home property st in the property? Check one y y d Debtor 2 only	Do not ded the amount Creditors V  Current va entire prop \$24  Describe t (such as for a life estat Jointly C	t of any secured who Have Clain alue of the perty?  44,576.00  he nature of your see simple, tensive), if known.  Dwned  k if this is cometructions)	Current value of the portion you own? \$244,576.  Sour ownership interestincy by the entireties
Yes. When the Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes	Part 2. Pre is the property?  2rd Street ess, if available, or other des  anch  NY  State	cription 11798-0000	What is the proper  Single-family Duplex or my Condominium Manufacture Land Investment p Timeshare Other Who has an interes Debtor 1 only Debtor 2 only At least one Other information property identifica	rty? Check all that apply y home ulti-unit building m or cooperative ed or mobile home property  st in the property? Check one y y d Debtor 2 only of the debtors and another you wish to add about this	Do not ded the amount Creditors V  Current va entire prop \$22  Describe t (such as for a life estat Jointly C	t of any secured who Have Clain alue of the perty?  44,576.00  he nature of your see simple, tensive), if known.  Dwned  k if this is cometructions)	Current value of the portion you own? \$244,576.  Sour ownership interestincy by the entireties

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debto	or 1 Michele Y McCal	lum-Evans		Case number (if known)	
3. <b>Ca</b>	rs, vans, trucks, tractors,	sport utility vel	hicles, motorcycles		
	No				
■ \					
_	res				
3.1	Make: Nissan		Who has an interest in the property? Check one		ed claims or exemptions. Put
0.1	Model: Altima		Debtor 1 only	,	ecured claims on Schedule D: Claims Secured by Property.
	Year: 2009		Debtor 2 only	Current value of th	
	Approximate mileage:	160000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:		$\square$ At least one of the debtors and another		
	good condition  Debt charged off but r		☐ Check if this is community property	\$3,269.0	00 \$3,269.00
	repossession		(see instructions)		
■ i	Yes	ortion you sw	n for all of your ontrine from Port 2 including	any ontrine for	
			n for all of your entries from Part 2, including		\$3,269.00
				L	
Part 3	Describe Your Personal ar	d Household Ite	ems		
Do y	ou own or have any legal o	or equitable int	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	nusehold goods and furnis nuser major appliances, for No Yes. Describe		, china, kitchenware		
	fur	niture, etc			\$1,500.00
Ex			eo, stereo, and digital equipment; computers, pri ledia players, games	nters, scanners; music col	lections; electronic devices
	ele	ctroncs			\$1,000.00
Ex	illectibles of value kamples: Antiques and figuri other collections, r No Yes. Describe		prints, or other artwork; books, pictures, or other llectibles	art objects; stamp, coin, c	or baseball card collections;
Ex	uipment for sports and ho kamples: Sports, photograph musical instrumen No Yes. Describe	ic, exercise, an	d other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes ar	nd kayaks; carpentry tools;
10. <b>F</b> i	irearms				
E	Examples: Pistols, rifles, sho	tguns, ammunit	ion, and related equipment		

Debtor	r 1 <u>M</u>	ichele Y M	<b>IcCallu</b> m	n-Evans		Case number (if known)	
	res. De	scribe					
11. <b>Cl</b> o							
<i>E</i> x □ N	•	Everyday c	lothes, fur	s, leather coats, de	esigner wear, shoes, accessorie	S	
Y	es. De	scribe					
			clothii	ng			\$1,500.00
12. <b>Je</b> v <i>E</i> x		Everyday je	ewelry, cos	stume jewelry, eng	agement rings, wedding rings, h	neirloom jewelry, watches, gems,	gold, silver
		scribe					
_ '	res. De	scribe					
			costu	me jewelry			\$300.00
13 <b>No</b>	n-farm a	animals					
Ex	kamples.	Dogs, cats,	birds, hor	rses			
■ N		scribe					
14. <b>An</b>	v other	personal ar	nd housel	hold items vou die	d not already list, including ar	ny health aids you did not list	
<b>I</b>	No	-		-		,,	
	res. Giv	e specific in	formation.				
15. <b>A</b>	dd the	dollar value	of all of	your entries from	Part 3, including any entries f	or pages you have attached	
					, , ,		\$4,300.00
Dout 4.	Dagaril	Vaur Fina	asial Assat	_			
		r have any			in any of the following?		Current value of the
							<pre>portion you own? Do not deduct secured</pre>
							claims or exemptions.
16. <b>Ca</b> :		Money you	have in yo	our wallet, in your h	nome, in a safe deposit box, and	d on hand when you file your petit	ion
<b>■</b> Y	res						
						Cash	\$20.00
17. <b>D</b> e	posits c	of money					
		Checking,			counts; certificates of deposit; s ts with the same institution, list	hares in credit unions, brokerage	houses, and other similar
	No	montations	. II you na	ve multiple accoun	·	each.	
<b>■</b> Y	res				Institution name:		
			17.1.	Checking	Wells Fargo		\$100.00
							-
			17.2.	Checking	Wells Fargo		\$50.00
			17 2	Savings	Wells Fargo		\$200.00
			17.3.	Javillys	Trons rango		Ψ200.00

De	ebtor 1	Michele Y McCallum-Evans	Case number (if known)	
18.		, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with broke	rage firms, money market accounts	
	■ No			
	☐ Yes	Institution or issuer nar	me:	
19.	joint v	ıblicly traded stock and interests in incorpora enture	ted and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No			
	⊔ Yes.	Give specific information about them  Name of entity:	% of ownership:	
	Negoti	nment and corporate bonds and other negotial able instruments include personal checks, cashie egotiable instruments are those you cannot transf	ers' checks, promissory notes, and money orders.	
		Give specific information about them		
	Li res.	Issuer name:		
21.		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(	(b), thrift savings accounts, or other pension or profit-sharing plan	s
	Yes.	List each account separately.  Type of account:	Institution name:	
		401(k)	Lincoln Financial	\$8,000.00
			at you may continue service or use from a company olic utilities (electric, gas, water), telecommunications companies,	or others
			Institution name or individual:	
23.	_	ies (A contract for a periodic payment of money to	o you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and description.		
24.	26 U.S.0	s in an education IRA, in an account in a qual C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ified ABLE program, or under a qualified state tuition progra	m.
	■ No □ Yes	Institution name and description. S	Separately file the records of any interests.11 U.S.C. § 521(c):	
	■ No		er than anything listed in line 1), and rights or powers exercis	able for your benefit
		Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and of oldes: Internet domain names, websites, proceeds		
	☐ Yes.	Give specific information about them		
		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, coopera	ative association holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them		
Mo	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.

De	ebtor 1	Michele Y McCallum-Evans	Case number (if known)	
28.	Tax ref ■ No	unds owed to you		
		Give specific information about them, including whether you already filed the	returns and the tax years	
	Examp	support  les: Past due or lump sum alimony, spousal support, child support, maintenar  Give specific information	nce, divorce settlement, property	settlement
30.		amounts someone owes you  les: Unpaid wages, disability insurance payments, disability benefits, sick pay benefits; unpaid loans you made to someone else	/, vacation pay, workers' compen	sation, Social Security
	☐ Yes.	Give specific information		
31.	Examp ■ No	ts in insurance policies  bles: Health, disability, or life insurance; health savings account (HSA); credit,  Name the insurance company of each policy and list its value.		
		Company name:	Beneficiary:	Surrender or refund value:
33. 34.	If you a someo  No  Yes.  Claims Examp  No  Yes.  Other o  No  Yes.  Any fin	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policine has died.  Give specific information  against third parties, whether or not you have filed a lawsuit or made a ples: Accidents, employment disputes, insurance claims, or rights to sue  Describe each claim  contingent and unliquidated claims of every nature, including counterclaim describe each claim	demand for payment	
	■ No □ Yes.	Give specific information		
36	for Pa	he dollar value of all of your entries from Part 4, including any entries fo rrt 4. Write that number here		\$8,370.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List any rea	al estate in Part 1.	
١	No. Go	own or have any legal or equitable interest in any business-related property?  to Part 6.  to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Industrial Own or have an interest in farmland, list it in Part 1.	nterest In.	
46.	■ No.	own or have any legal or equitable interest in any farm- or commercial f Go to Part 7. . Go to line 47.	fishing-related property?	
Pa	nrt 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	ve	

Debte	or 1 Michele Y McCallum-Evans		Case number (if known)	
	o you have other property of any kind you did not already list?  Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			_
55.	Part 1: Total real estate, line 2			\$244,576.00
56.	Part 2: Total vehicles, line 5	\$3,269.00		
57.	Part 3: Total personal and household items, line 15	\$4,300.00		
58.	Part 4: Total financial assets, line 36	\$8,370.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$15,939.00	Copy personal property to	tal <b>\$15,939.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$260,515.00

De	ll in this inforn		case:		4419
	ebtor 1	Michele Y McCall			
De	ebtor 2	First Name	Middle Name	Last Name	
	ouse if, filing)	First Name	Middle Name	Last Name	•
Ur	nited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF N	NEW YORK	
	ase number _ known)				☐ Check if this is an amended filing
		rm 106C	anarty Val. Ch	oim oc Evompt	
<u> </u>	chedui	e C: The Pro	sperty fou Cia	aim as Exempt	4/16
the nee cas	property you li eded, fill out an se number (if kr r each item of	sted on Schedule A/B: F d attach to this page as nown). property you claim as	Property (Official Form 106A/E many copies of Part 2: Addition exempt, you must specify the specific than th	as your source, list the property that your all Page as necessary. On the top of a sheet amount of the exemption you claim	any additional pages, write your name and
any fun exe	/ applicable st ds—may be u emption to a p	tatutory limit. Some exc Inlimited in dollar amou	emptions—such as those fo unt. However, if you claim a	or health aids, rights to receive certain n exemption of 100% of fair market v	n benefits, and tax-exempt retirement
Pa	rt 1: Identif	fy the Property You Cla	im as Exempt		
1.	Which set of	exemptions are you c	laiming? Check one only, ev	en if your spouse is filing with you.	
	You are cl	aiming state and federal	nonbankruptcy exemptions.	11 U.S.C. § 522(b)(3)	
	☐ You are cla				
		aiming federal exemption	ns. 11 U.S.C. § 522(b)(2)		
2.	For any prop			cempt, fill in the information below.	
2.	Brief descripti	perty you list on Sched	ule A/B that you claim as ex	empt, fill in the information below.  Amount of the exemption you claim	Specific laws that allow exemption
2.	Brief descripti	perty you list on Sched	ule A/B that you claim as ex	• •	Specific laws that allow exemption
2.	Brief descripti Schedule A/B	perty you list on Sched ion of the property and lin that lists this property  n Altima 160000 mile	e on  Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim	Debtor & Creditor Law §
2.	Brief descripti Schedule A/B  2009 Nissa good condi Debt charg repossessi	perty you list on Sched ion of the property and linthat lists this property  n Altima 160000 mile ition ed off but no	e on  Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Debtor & Creditor Law § – 282(1)
2.	Brief descripti Schedule A/B  2009 Nissa good condi Debt charg repossessi Line from Sch	operty you list on Sched ion of the property and line that lists this property  In Altima 160000 mile ition led off but no lon the dule A/B: 3.1	e on  Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.  \$3,269.00	Debtor & Creditor Law § 282(1)
2.	Brief descripti Schedule A/B  2009 Nissa good condi Debt charg repossessi Line from Sch	operty you list on Sched ion of the property and line that lists this property in Altima 160000 mile ition led off but no lon thedule A/B: 3.1	e on Current value of the portion you own Copy the value from Schedule A/B  \$3,269.00	Amount of the exemption you claim  Check only one box for each exemption.  \$3,269.00  100% of fair market value, up tany applicable statutory limit	Debtor & Creditor Law § 282(1)  NYCPLR § 5205(a)(5)
2.	Brief descripti Schedule A/B  2009 Nissa good condi Debt charg repossessi Line from Sch  furniture, e Line from Sch	nerty you list on Sched ion of the property and line that lists this property in Altima 160000 mile ition ed off but no on hedule A/B: 3.1	e on Current value of the portion you own Copy the value from Schedule A/B  \$3,269.00	Amount of the exemption you claim  Check only one box for each exemption.  \$3,269.00  100% of fair market value, up to any applicable statutory limit  \$1,500.00  100% of fair market value, up to any applicable statutory limit	Debtor & Creditor Law § 282(1)  NYCPLR § 5205(a)(5)
2.	Brief descripti Schedule A/B  2009 Nissa good condi Debt charg repossessi Line from Sch  furniture, e Line from Sch	operty you list on Sched ion of the property and line that lists this property  In Altima 160000 mile ition led off but no lon the dule A/B: 3.1	e on Current value of the portion you own Copy the value from Schedule A/B  \$3,269.00	Amount of the exemption you claim  Check only one box for each exemption.  \$3,269.00  100% of fair market value, up tany applicable statutory limit  \$1,500.00  100% of fair market value, up tany applicable statutory limit	Debtor & Creditor Law § 282(1)  NYCPLR § 5205(a)(5)  NYCPLR § 5205(a)(5)
2.	Brief descripti Schedule A/B  2009 Nissa good condi Debt charg repossessi Line from Sch  tine from Sch  electroncs Line from Sch  clothing	nerty you list on Sched ion of the property and line that lists this property in Altima 160000 mile ition ed off but no on hedule A/B: 3.1	e on Current value of the portion you own Copy the value from Schedule A/B  \$3,269.00	Amount of the exemption you claim  Check only one box for each exemption.  \$3,269.00  100% of fair market value, up to any applicable statutory limit  \$1,500.00  100% of fair market value, up to any applicable statutory limit  \$1,000.00	Debtor & Creditor Law § 282(1)  NYCPLR § 5205(a)(5)  NYCPLR § 5205(a)(5)

Official Form 106C

costume jewelry

Line from Schedule A/B: 12.1

\$300.00

NYCPLR § 5205(a)(6)

\$300.00

100% of fair market value, up to any applicable statutory limit

De	eptor 1 Wilchele Y WicCallum-Evans			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	Cash Line from Schedule A/B: 16.1	\$20.00 <b>■</b>		\$20.00	NYCPLR § 5205(a)(9)	
	Line Holl Schedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Wells Fargo Line from Schedule A/B: 17.1	\$100.00		\$100.00	NYCPLR § 5205(a)(9)	
	Line from Schedule Arb. 11.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Wells Fargo Line from Schedule A/B: 17.2	\$50.00		\$50.00	NYCPLR § 5205(a)(9)	
	Line from Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit		
	Savings: Wells Fargo Line from Schedule A/B: 17.3	\$200.00		\$200.00	NYCPLR § 5205(a)(9)	
	Line Horr Schedule A.B. 11.3			100% of fair market value, up to any applicable statutory limit		
	401(k): Lincoln Financial Line from Schedule A/B: 21.1	\$8,000.00		\$8,000.00	Debtor & Creditor Law § 282(2)(e)	
	Line Horr Schedule A.B. 2111			100% of fair market value, up to any applicable statutory limit	202(2)(0)	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	ıt.)	
	■ No	,			,	
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No	, ,	-	, , , , , , , , , , , , , , , , , , , ,		
	☐ Yes					

	n this information to identify y	our case:				4419
Deb	tor 1 Michele Y Mc	Callum-Evans				
	First Name	Middle Name	Last Name			
	tor 2 se if, filing) First Name	Middle Name	Last Name		-	
Unit	ed States Bankruptcy Court for the	e: EASTERN DISTRICT OF NEW	/ YORK		-	
	e number					
(if kno	wn)				_	c if this is an ded filing
					amen	aca iiiiig
Offi	cial Form 106D					
Sc	hedule D: Credito	s Who Have Claims	Secured	by Propert	V	12/15
is nee		e. If two married people are filing togeth it out, number the entries, and attach it				
	any creditors have claims secured	by your property?				
		t this form to the court with your other	schedules. Yo	ou have nothing else t	to report on this form.	
	Yes. Fill in all of the information	•		, and the second	•	
Part	1: List All Secured Claims					
2. Lis	st all secured claims. If a creditor ha	is more than one secured claim, list the cre lias a particular claim, list the other creditors etical order according to the creditor's nam	s in Part 2. As	Column A  Amount of claim Do not deduct the	Column B  Value of collateral that supports this	Column C Unsecured portion
2. List	st all secured claims. If a creditor had ach claim. If more than one creditor In as possible, list the claims in alphab	as a particular claim, list the other creditors	s in Part 2. As	Amount of claim	Value of collateral that supports this claim	Unsecured portion If any
2. Lis	st all secured claims. If a creditor had ach claim. If more than one creditor In as possible, list the claims in alphabase Specialized Loan Servicing - SLS	as a particular claim, list the other creditors	s in Part 2. As e.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion If any
2. List	st all secured claims. If a creditor had ach claim. If more than one creditor In as possible, list the claims in alphabase Specialized Loan	as a particular claim, list the other creditors etical order according to the creditor's nam	the claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2. List	st all secured claims. If a creditor had ach claim. If more than one creditor had as possible, list the claims in alphabate as possible, list the claims in alphabate as possible.  Specialized Loan Servicing - SLS Creditor's Name  Lucent Blvd., Suite 300 Highlands Ranch, CO	Describe the property that secures to 21 S. 32rd Street Wyandanc 11798 Suffolk County Property owned jointly with Debtor's father  As of the date you file, the claim is: apply.  Unliquidated	the claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for each much 2.1	st all secured claims. If a creditor had ach claim. If more than one creditor had as possible, list the claims in alphabase specialized Loan Servicing - SLS  Creditor's Name  Lucent Blvd., Suite 300  Highlands Ranch, CO 80129	Describe the property that secures to 21 S. 32rd Street Wyandanc 11798 Suffolk County Property owned jointly with Debtor's father  As of the date you file, the claim is: apply.	the claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured claims. If a creditor has ach claim. If more than one creditor has possible, list the claims in alphabase specialized Loan Servicing - SLS Creditor's Name  Lucent Blvd., Suite 300 Highlands Ranch, CO 80129  Number, Street, City, State & Zip Code  owes the debt? Check one.	Describe the property that secures of 21 S. 32rd Street Wyandanc 11798 Suffolk County Property owned jointly with Debtor's father  As of the date you file, the claim is: apply.  Unliquidated Disputed Nature of lien. Check all that apply.	s in Part 2. As e.  the claim: h, NY  Check all that	Amount of claim Do not deduct the value of collateral. \$282,208.39	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured claims. If a creditor has ach claim. If more than one creditor has possible, list the claims in alphabate as possible.  Specialized Loan Servicing - SLS  Creditor's Name  Lucent Blvd., Suite 300  Highlands Ranch, CO 80129  Number, Street, City, State & Zip Code  o owes the debt? Check one.	Describe the property that secures to 21 S. 32rd Street Wyandanc 11798 Suffolk County Property owned jointly with Debtor's father  As of the date you file, the claim is: apply.  Contingent Unliquidated Disputed	s in Part 2. As e.  the claim: h, NY  Check all that	Amount of claim Do not deduct the value of collateral. \$282,208.39	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured claims. If a creditor has ach claim. If more than one creditor has possible, list the claims in alphabase specialized Loan Servicing - SLS Creditor's Name  Lucent Blvd., Suite 300 Highlands Ranch, CO 80129  Number, Street, City, State & Zip Code  owes the debt? Check one.	Describe the property that secures of 21 S. 32rd Street Wyandanc 11798 Suffolk County Property owned jointly with Debtor's father  As of the date you file, the claim is: apply.  Contingent  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as	s in Part 2. As e.  the claim: h, NY  Check all that	Amount of claim Do not deduct the value of collateral. \$282,208.39	Value of collateral that supports this claim	Unsecured portion If any
2. List for each much	st all secured claims. If a creditor has ach claim. If more than one creditor in as possible, list the claims in alphable.  Specialized Loan Servicing - SLS Creditor's Name  Lucent Blvd., Suite 300 Highlands Ranch, CO 80129  Number, Street, City, State & Zip Code of owes the debt? Check one. ebtor 1 only ebtor 2 only	Describe the property that secures as a particular claim, list the other creditor's name.  Describe the property that secures are considered as a surface of the date of the claim is:  1798 Suffolk County Property owned jointly with Debtor's father  As of the date you file, the claim is: 1809 apply. 1919 Contingent 1919 Unliquidated 1919 Disputed 1919 Nature of lien. Check all that apply. 1920 An agreement you made (such as car loan) 1921 Statutory lien (such as tax lien, meaning the creditors)	s in Part 2. As e.  the claim: h, NY  Check all that	Amount of claim Do not deduct the value of collateral. \$282,208.39	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured claims. If a creditor has ach claim. If more than one creditor has possible, list the claims in alphable.  Specialized Loan Servicing - SLS Creditor's Name  Lucent Blvd., Suite 300 Highlands Ranch, CO 80129  Number, Street, City, State & Zip Code  owes the debt? Check one.  ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only	Describe the property that secures as a particular claim, list the other creditor's name and the creditor's name are according to the creditor's father.  As of the date you file, the claim is: apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, meaning the creditors).	s in Part 2. As e.  the claim: h, NY  Check all that	Amount of claim Do not deduct the value of collateral. \$282,208.39	Value of collateral that supports this claim	Unsecured portion If any

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$282,208.39

Official Form 106D

Write that number here:

Fill in this infor	mation to identify your case:					44
Debtor 1	Michele Y McCallum-Ev					
D.1.	First Name	Middle Name Last Nam	е			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Nam	e			
	ankruptcy Court for the: EAS	TERN DISTRICT OF NEW YORK				
Case number (if known)					_	if this is an
Be as complete ar any executory con Schedule G: Exec Schedule D: Credi	E/F: Creditors Who I  d accurate as possible. Use Part  tracts or unexpired leases that co  utory Contracts and Unexpired Le  tors Who Have Claims Secured by	Have Unsecured Claim  I for creditors with PRIORITY claims a buld result in a claim. Also list executo ases (Official Form 106G). Do not inclu Property. If more space is needed, cc u have no information to report in a P	nd Part 2 fo ory contract ude any cre opy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out, i	Property (Official For secured claims that a number the entries i	rm 106A/B) and of are listed in n the boxes on th
name and case nu		•	,		-	, <b>,</b>
	ors have priority unsecured claim					
☐ No. Go to	Part 2.					
Yes.						
<ol><li>List all of you identify what to possible, list the</li></ol>	ype of claim it is. If a claim has both ne claims in alphabetical order accor	reditor has more than one priority unsecu priority and nonpriority amounts, list that or ding to the creditor's name. If you have n claim, list the other creditors in Part 3.	claim here a	nd show both priority a	nd nonpriority amoun	its. As much as
(For an explar	nation of each type of claim, see the	instructions for this form in the instruction	booklet.)	Total claim	Priority	Nonpriority
0.4 Intowns	J Davanua Camilaa	Look A digita of account mount on	4046	£4 000 00	amount	amount
	Il Revenue Service reditor's Name	Last 4 digits of account number	4910	\$1,902.00	\$1,902.00	\$0.
,	ox 7346	When was the debt incurred?	2/2016		_	
	elphia, PA 19101-7346	As of the data you file the eleim	in Charles	Il that apply		
	Street City State ZIp Code ed the debt? Check one.	As of the date you file, the claim	is: Check a	iii that appiy		
_		☐ Contingent				
Debtor 1	•	☐ Unliquidated				
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
☐ At least o	one of the debtors and another	☐ Domestic support obligations				
☐ Check if	this claim is for a community deb	Taxes and certain other debts	ou owe the	government		
	subject to offset?	Claims for death or personal in	jury while yo	u were intoxicated		
■ No		Other Specify				

☐ Yes

Debto	or 1 Michele Y McCallum-Evans		Case nu	mber (if know)		
2.2	NYS Commissioner Tax & Finance Priority Creditor's Name Civil Enforcement WA Harriman State Campus Albany, NY 12227-0001	Last 4 digits of account number When was the debt incurred?	0072 5/2013	\$3,600.00	\$0.00	\$3,600.00
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all t	hat apply		
1	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
1	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
ı	☐ Check if this claim is for a community debt is the claim subject to offset?	■ Taxes and certain other debts y □ Claims for death or personal inj □ Other. Specify	_			
I	☐ Yes	Satisfied 5	/15/2014			
4. Li ur th	Yes.  Ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify wh	at type of claii	m it is. Do not list claims al	ready included in F	Part 1. If more ion Page of
4.1	Canital One Automobile Financing	Look 4 digito of account numb	1001		i otai oi	
4.1	Capital One Automobile Financing Nonpriority Creditor's Name 3901 North Dallas Tollway Dallas, TX 75093 Number Street City State Zlp Code	Last 4 digits of account numb  When was the debt incurred?  As of the date you file, the cla	3/2012			\$18,315.00
	Who incurred the debt? Check one.	As of the date you me, the old	iii i3. Oneok e	ян инас арргу		
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	■ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ıred claim:			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a s report as priority claims	eparation agre	eement or divorce that you	did not	
	■ No	Debts to pension or profit-sh	aring plans, ar	nd other similar debts		
	-	Collection				
	Yes		off 12/201	3		

Debtor	1 Michele Y McCallum-Evans	Case number (if know)	
4.2	Chase Bank USA NA	Last 4 digits of account number 9832	\$1,515.00
	Nonpriority Creditor's Name 201 N. Walnut Street	When was the debt incurred? 10/2014	
	Wilmington, DE 19801  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Revolving Credit	
4.3	Dept of Ed/ Navient	Last 4 digits of account number 0160	\$17,644.00
	Nonpriority Creditor's Name PO Box 9655	When was the debt incurred? 5/2016	
	Wilkes Barre, PA 18773  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	☐ Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
	163	Student Loan	
4.4	Enhanced Recovery Co.	Last 4 digits of account number 3398	\$0.00
	Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred? 9/2014	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	■ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Collection	
	Yes	original creditor "Sprint"  ■ Other. Specify Debt belonged to ex-husband	

Debtor	Michele Y McCallum-Evans		Case number (if know)	
4.5	IC Systems Inc Nonpriority Creditor's Name	Last 4 digits of account number	8001	\$1,856.00
	PO Box 64378 Saint Paul, MN 55164	When was the debt incurred?	10/2015	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify original cre	editor - "PSEG Long Island"	
4.6	MRC Receivables Corp	Last 4 digits of account number	7458	\$954.96
	Nonpriority Creditor's Name c/o Selip & Stlianou fka Cohen & Slamowitz, LLP	When was the debt incurred?	10/2007	
	PO Box 9012 Woodbury, NY 11797-9012 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Judgment		
4.7	New York Telephone Co.  Nonpriority Creditor's Name	Last 4 digits of account number	7335	\$171.34
	c/o William Weiss 375 Pearl Street, Rm 1208	When was the debt incurred?	7/1990	
	New York, NY 10038			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Judgment Other. Specify Satisfied 10	0/1990	

Debtor	Michele \	/ McCallum-Evans		Case r	number (if I	know)		
	PC Richard		Last 4 digits of account number	4221				\$3,752.00
	<b>PO Box 981</b>		When was the debt incurred?	3/201	14			
		City State Zlp Code	As of the date you file, the claim	is: Checl	k all that ap	ply		
		the debt? Check one.	• •					
	Debtor 1 on	ly	☐ Contingent					
	Debtor 2 on	ly	☐ Unliquidated					
	Debtor 1 an	d Debtor 2 only	☐ Disputed					
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	_	is claim is for a community	☐ Student loans					
	debt	•	Obligations arising out of a sepa	aration ag	greement or	divorce that you	did not	
	_	bject to offset?	report as priority claims  Debts to pension or profit-sharir	na plane	and other s	imilar dobte		
	No			ig piaiis,	and other s	irillar debis		
	☐ Yes		Other. Specify Charged of	ff 8/201	15			
	Portfolio Re	ecovery Associates	Last 4 digits of account number	3763	}			\$549.00
	120 Corpor Suite 100	ate Blvd.	When was the debt incurred?	4/201	10			
	Norfolk, VA		As a fall of the second second second					
		City State Zlp Code	As of the date you file, the claim	is: Checi	k all that app	ply		
	Debtor 1 on	the debt? Check one.	☐ Contingent					
		•	☐ Unliquidated					
	Debtor 2 on							
	Debtor 1 an	•	■ Disputed  Type of NONPRIORITY unsecure	ما داداس،				
		of the debtors and another	Student loans	u Ciaiiii.				
	☐ Check if thi debt	is claim is for a community		4!		- di	-11-d 4	
		bject to offset?	Obligations arising out of a separeport as priority claims	aration aç	greement or	divorce that you	ala not	
	■ No		Debts to pension or profit-sharing	ng plans,	and other s	imilar debts		
			Collection					
	☐ Yes		Other. Specify original cre	editor -	"HSBC"	1		
is tryin have n	is page only if y ng to collect fro nore than one o d for any debts	m you for a debt you owe to some	ut your bankruptcy, for a debt that yene else, list the original creditor in but listed in Parts 1 or 2, list the addiubmit this page.	Parts 1	or 2, then	list the collectio	n agency here.	Similarly, if you
				onortina	. nurnacac	anh: 20 H C C	S1EO Add the a	mounts for each
	f unsecured cla		. This information is for statistical r	eporting	purposes	only. 28 0.3.C.	g 159. Add the a	inounts for each
						Total Claim		
	6a. otal	Domestic support obligations		6a.	\$		0.00	
cla from Pa	nims art 1 6b.	Taxes and certain other debts yo	ou owe the government	6b.	\$	5	502.00	
	6c.	Claims for death or personal inju	<u> </u>	6c.	\$	<u>J</u> ,	0.00	
	6d.	Other. Add all other priority unsecu	ured claims. Write that amount here.	6d.	\$		0.00	
	6e.	Total Priority. Add lines 6a throug	h 6d.	6e.	\$	5,	502.00	
						Tetal Olivini		
	6f.	Student loans		6f.	\$	Total Claim 17.	644.00	
	otal				*	.,,		
cla from Pa	ims art 2 6g.		aration agreement or divorce that	6g.	\$		0.00	
		you did not report as priority cla	IIII5	υg.	Ψ			

#### Debtor 1 Michele Y McCallum-Evans

- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

Case number (if know)

6h. \$ 0.00 6i. \$ 27,113.30

6j. \$ **44,757.30** 

Fill in this info	rmation to identify your	4419		
Debtor 1	Michele Y McCall	um-Evans		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3	Oity		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	Oity		Otate	Zii Oodc	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		State	ZIF COUE	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

FIII IN THIS I	information to identify yo	ur case:			4419
Debtor 1	Michele Y McC		Last Name		
Debtor 2	First Name	Middle Name	Last Name		
Spouse if, filing	g) First Name	Middle Name	Last Name		
Jnited State	es Bankruptcy Court for the	EASTERN DISTRICT O	F NEW YORK		
Case numb	er				
if known)				_	ck if this is an
				amei	nded filing
Official	Form 106H				
	ule H: Your Co	dehtors			12/15
Cilcu	die II. Toul Go	debioi 3			12/13
1. Do y	ou have any codebtors?	(If you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No □ Yes					
		ou lived in a community pr		ry? (Community property states and terri	tories include
_		,	,		
_	Go to line 3.				
□ Yes.	Did your spouse, former s	pouse, or legal equivalent live	e with you at the time?		
in line 2 Form 1	2 again as a codebtor on	ly if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List sure you have listed the creditor on S 06G). Use Schedule D, Schedule E/F, c	chedule D (Official
	Column 1: Your codebtor ame, Number, Street, City, State an	d ZIP Code		Column 2: The creditor to whom you Check all schedules that apply:	you owe the debt
24				October D. Pro-	
3.1 N	lame			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	_
N	lumber Street			_	
	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			Schedule E/F, line	
				☐ Schedule G, line	_
N	lumber Street			_	
С	ity	State	ZIP Code		

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	in this information to identify your c								
Deb	otor 1 Michele Y M	cCallum-Evans							
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK						
(If kn	se number					Check if this is  An amende  A supplement  13 income	ed filing ent showin	g postpetition ollowing date:	chapter
$O_1$	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t 1: Describe Employment	ır spouse is not filing wi	th you, do not incl	ude infor	mati	on about your spo	ouse. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed	■ Employed					
		Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Revenue Cycle	Revenue Cycle Manager					
	Include part-time, seasonal, or self-employed work.	Employer's name	Valley Medical	Group					
	Occupation may include student or homemaker, if it applies.	Employer's address	15 Essex Road Paramus, NJ 0	=					
		How long employed t	here? 3 year	s					
Par	t 2: Give Details About Mor	nthly Income							
spou If yo	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, co	, ,	·				Ţ	J
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7,321.60	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	7,321.60	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions 5c. Voluntary	Debto	or 1	Michele Y McCallum-Evans	_		Cas	se number (if known)				
S. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions for retirement plans  5c. Voluntary contributions for retirement plans  5d. Required repayments of retirement plans  5d. Required repayments of retirement flans  5d. No. Required repayments of retirement flans  5d. Required repayments of retirement fund loans  5d. No. Domestic support obligations  5d. Isourance  5d. Domestic support obligations  5d. Isourance  5d. So. O.000 \$ NIA  5d. Domestic support obligations  5d. Isourance  5d. So. O.000 \$ NIA  5d. Domestic support obligations  5d. Isourance  5d. So. O.000 \$ NIA  5d. Domestic support obligations  5d. Voluntary obligations  5d						Fo	or Debtor 1				
5a. Tax, Medicaro, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund to see Social Security 5c. No. Social Security 5c. No. Domestic support obligations 5c. Voluntary contributions Specify. Life insurance 5c. Domestic support obligations 5c. Voluntary contributions		Сор	y line 4 here	4.		\$	7,321.60		-ming spo		
5a. Tax, Medicaro, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund to see Social Security 5c. No. Social Security 5c. No. Domestic support obligations 5c. Voluntary contributions Specify. Life insurance 5c. Domestic support obligations 5c. Voluntary contributions	5	Lict									
56. Mandatory contributions for retirement plans  56. Voluntary contributions for retirement plans  56. Required repayments of retirement fund loans  56. So. So. 0.000 \$ N/A  56. Insurance  57. \$0.000 \$ N/A  58. Insurance  58. \$0.000 \$ N/A  59. Union dues  59. \$0.000 \$ N/A  59. Union dues  59. \$0.000 \$ N/A  50. Union dues  59. \$0.000 \$ N/A  50. Union dues  59. \$0.000 \$ N/A  50. Union dues  50. \$0.000 \$ N/A  50. Examily support payments that you, a non-filling spouse, or a dependent regularly received include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  50. \$0.000 \$ N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. N/A  50. Union dues  50. \$0.000 \$ N/A  50. \$0.000				-	_	Φ	0.400.04	œ.		<b>N</b> 1/A	
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Rogularder peayments of retirement fund loans 5d. Rogularder peayments of retirement fund loans 5d. So. Done So. N/A 5d. Donestic support obligations 5d. So. Olion So. N/A 5d. Union dues 5d. So. Olion So. N/A 5d. Virial So. Olion So. N/A 5d. Virial So. Virial S			· · · · · · · · · · · · · · · · · · ·				•				
5-6.   Required repayments of retirement fund loans   5-6.   \$ 0.00   \$ N/A			·			٠.		· · —			
56. Insurance  57. Donostic support obligations  58. Union dues  59. Union du			,					· · —			
50. Domestic support obligations 50. Union dues 50. Union dues 50. Union dues 50. Sp. Sp. O.00 \$ M/A 50. Other deductions. Specify: Life insurance 50. Sp. \$ 57.11 \$ M/A Filtness Center 50. N/A NJHAPC 50. \$ 164.43 \$ M/A Medical Pre-tax 50.00 \$ M/A Medical Pre-tax 60. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 2,605.99 \$ M/A Medical Pre-tax M/A						٠.		· · —			
5g. Union dues								· · —			
Sh. Other deductions. Specify: Life insurance Disability Fitness Center NJHAPC Sh. Sh. Sh. Sh. Sh. Sh. Sh. Sh. N/A NJHAPC Sh. Sher-Tax Sh. Sh. Sh. Sh. Sh. N/A Medical Pre-tax Sh. Sh. Sh. Sh. Sh. Sh. N/A Medical Pre-tax Sh. Sh. Sh. Sh. Sh. Sh. N/A Dental Pre-tax Sh. Sh. Sh. Sh. Sh. Sh. N/A Medical Pre-tax Sh. Sh. Sh. Sh. Sh. Sh. Sh. Sh. Sh. N/A Dental Pre-tax Sh.			• • •			٠.		· · —			-
Disability Fitness Center NJHAPC FSA PTe-Tax NJHAPC FSA PTe-Tax Medical Pro-tax S		-						: —			
Fitness Center NJHAPC FSA Pre-Tax NJHAPC FSA Pre-Tax Medical Pre-tax S 160.49 \$ N/A  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 2,605.99 \$ N/A  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 2,605.99 \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,715.61 \$ N/A  List all other income regularly received: 8. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8. Interest and dividends 8. \$ 0.00 \$ N/A  8. \$ 0.00 \$ N/A  8. Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8. Unemployment compensation 8. Social Security 8. Social Security 8. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as lood stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8. Pension or retirement income 8. 0.00 \$ N/A  8. 0.00 \$ N/A  9. Add all other income. Add line 7 + line 9. Add the entires in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expense		0111		_ "		_		· · —			
NJHAPC   \$ 164.43 \$ N/A				_				· · ·			
FSA Pre-Tax Medical Pre-tax Dental Pre-tax Dental Pre-tax  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 2,605.99 \$ N/A  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 4,715.61 \$ N/A  List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. \$ 0.00 \$ N/A  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. Social Security  8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  \$ \$ 0.00 \$ N/A  8g. \$ 0.00 \$ N/A  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8g. \$ 0.00 \$ N/A  8g. Pension or retirement income.  Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9 \$ 0.00 \$ N/A  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9 \$ 0.00 \$ N/A  11. +\$ 0.00 \$ N/A  12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  13. Do you expect an increase or decrease within the year after you file this form?				_				- :			
Medical Pre-tax   \$ 60.49   \$ N/A						\$		\$			
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 2,605.99 \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,715.61 \$ N/A  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. Family support payments that you gualarly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A 11. +\$ 0.00 12. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies						\$	60.49	\$		N/A	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received:  8. Net income from rental property and from operating a business, profession, or farm.  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8. 10.00 \$ N/A  8. 20.00 \$ N/A  8. 20.00 \$ N/A  8. 20.00 \$ N/A  8. 30.00 \$ N/A  8. 30.00 \$ N/A  8. 40.00 \$ N/A  8. 50.00			Dental Pre-tax			\$	30.62	\$		N/A	•
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and propenty settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. Social Security  8f. Outher government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (leneman) non-cash assistance that you receive, such as food stamps (leneman).  8f. Other government assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (leneman).  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  Combined monthly income.  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$	2.605.99	\$		N/A	
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8f. \$ 0.00 \$ N/A 8h. Other monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  10. Do you expect an increase or decrease within the year after you file this form?						\$		\$ \$			
8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. Social Security 8e. Social Security 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.0						Ψ.	4,7 10.01	*_		1471	-
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.0  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. Combined monthly income.  13. Do you expect an increase or decrease within the year after you file this form?  No.		<ul><li>8a.</li><li>8b.</li><li>8c.</li><li>8d.</li><li>8e.</li><li>8f.</li><li>8g.</li><li>8h.</li></ul>	Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	88 86 86 86 86 86 86 86 86 86 86 86 86 8	b. c. d. e. f. g. h.+	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ + \$		N/A N/A N/A N/A N/A	
<ul> <li>State all other regular contributions to the expenses that you list in <i>Schedule J</i>. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i>. Specify:  11. +\$ 0.0</li> <li>Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i>, if it applies  Combined monthly income.  No.</li> </ul>			· · · · · · · · · · · · · · · · · · ·	10.	\$		4,715.61 + \$		N/A =	\$	4,715.61
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 4,715.6  Combined monthly income.  No. No.	11.	State Inclu other Do n	e all other regular contributions to the expenses that you list in <i>Schedule</i> ide contributions from an unmarried partner, members of your household, your r friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not	dep				•		\$	0.00
13. Do you expect an increase or decrease within the year after you file this form?  ■ No		Write	e that amount on the Summary of Schedules and Statistical Summary of Certain						12. \$		4,715.61 ned
	13.	Do y ■		?							

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:			4419
Deb	Michele Y McCallum-Evans	Che	eck if this is:	
	ouse, if filing)		An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Uni	ited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		MM / DD / YYYY	
1	se numberknown)			
0	fficial Form 106J			
	chedule J: Your Expenses			12/15
info	as complete and accurate as possible. If two married people are filing together ormation. If more space is needed, attach another sheet to this form. On the top mber (if known). Answer every question.			
Par 1.	rt 1: Describe Your Household Is this a joint case?			
1.	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?  □ No			
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Hol	usehold of De	btor 2.	
2.	Do you have dependents? ■ No			
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Debtor 1 or Del		Dependent's age	Does dependent live with you?
	Do not state the dependents names.			□ No □ Yes □ No □ Yes
				□ No □ Yes
				□ No
2	Do your expenses include			☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?			
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are using this penses as of a date after the bankruptcy is filed. If this is a supplemental <i>Sched</i> plicable date.	s form as a s lule J, check	upplement in a Cha the box at the top o	pter 13 case to report f the form and fill in the
the	clude expenses paid for with non-cash government assistance if you know evalue of such assistance and have included it on <i>Schedule I: Your Income</i> fficial Form 106I.)		Your expo	enses
4.	The rental or home ownership expenses for your residence. Include first mortg payments and any rent for the ground or lot.	gage 4.	\$	2,660.00
	If not included in line 4:			
	4a. Real estate taxes	4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance	4b.		0.00
	Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues	4c. 4d.		0.00 0.00
5.	Additional mortgage payments for your residence, such as home equity loans	5.	·	0.00

Debtor 1	Michele	Y McCallum-Evans	Case num	ber (if known)	
6. <b>Uti</b> l	lities:				
6a.		heat, natural gas	6a.	\$	220.00
6b.	•	ver, garbage collection	6b.	·	37.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	90.00
6d.		ecify: Cell phone	6d.	\$	100.00
		ekeeping supplies	7.	\$	330.00
		hildren's education costs	8.	\$	0.00
		ry, and dry cleaning	9.	\$	100.00
	•	roducts and services	10.	·	25.00
	-	ntal expenses	11.		46.00
		Include gas, maintenance, bus or train fare.	11.	Ψ	40.00
	not include ca		12.	\$	60.00
		clubs, recreation, newspapers, magazines, and bo	oks 13.	\$	21.00
		ributions and religious donations	14.	\$	0.00
	urance.	3		*	
		surance deducted from your pay or included in lines 4	or 20.		
15a	a. Life insura	nce	15a.	\$	0.00
15b	o. Health ins	urance	15b.	\$	0.00
150	c. Vehicle ins	surance	15c.	\$	274.00
150	d. Other insu	rance. Specify:	15d.	\$	0.00
6. <b>Tax</b>	kes. Do not in	clude taxes deducted from your pay or included in line	s 4 or 20.		
	ecify:	, , ,	16.	\$	0.00
7. Ins	tallment or le	ease payments:		-	
17a	a. Car payme	ents for Vehicle 1	17a.	\$	0.00
17b	o. Car payme	ents for Vehicle 2	17b.	\$	0.00
170	c. Other. Spe	ecify:	17c.	\$	0.00
170	d. Other. Spe	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did		Φ.	0.00
		your pay on line 5, Schedule I, Your Income (Officia		\$	
		s you make to support others who do not live with y	•	\$	0.00
	ecify:		19.		
		erty expenses not included in lines 4 or 5 of this fo			0.00
		s on other property	20a.		0.00
	o. Real estat		20b.		0.00
		nomeowner's, or renter's insurance	20c.	· ·	0.00
		ce, repair, and upkeep expenses	20d.		0.00
		er's association or condominium dues	20e.	\$	0.00
1. <b>Oth</b>	ner: Specify:		21.	+\$	0.00
2 Cal	lculate vour i	monthly expenses			
	a. Add lines 4			\$	3,963.00
		2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$	
	. ,		7 01111 1000 2	e —	2 002 00
220	Auu iirie 22	a and 22b. The result is your monthly expenses.		Φ	3,963.00
23. <b>Ca</b> l	lculate your i	monthly net income.			
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	4,715.61
		monthly expenses from line 22c above.	23b.	-\$	3,963.00
					·
230		our monthly expenses from your monthly income.	<i>-</i>	<u></u>	750.64
	The result	is your monthly net income.	23c.	\$	752.61
		an increase or decrease in your expenses within the use expect to finish paying for your car loan within the year or do			ir decrease bossuss of a
		terms of your mortgage?	, you expect your mongage [	Dayment to increase 0	uecicase necause of a
_	No.				
		Evolein horo			
$\Box$	Yes.	Explain here:			

Fill in this	information to identify your	case:			4419
Debtor 1	Michele Y McCall	um-Evans			
	First Name	Middle Name	Last Name		
Debtor 2	T N	AC. 1 11 A.			
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK		
Case numb	per			☐ Check if this is an	
				amended filing	
	Form 106Dec ration About a	ın Individua	l Debtor's Sch	nedules	12/15
obtaining n		n connection with a bar		Making a false statement, concealing property, fines up to \$250,000, or imprisonment for up to	
Did yo	ou pay or agree to pay some	one who is NOT an atto	orney to help you fill out bar	nkruptcy forms?	
	No				
□ Y	Yes. Name of person			Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form	,
	penalty of perjury, I declare ney are true and correct.	that I have read the sur	mmary and schedules filed v	with this declaration and	
X /s	/ Michele Y McCallum-Eva	ans	X		
M	lichele Y McCallum-Evans gnature of Debtor 1	-	Signature of De	ebtor 2	
Da	ate September 26, 2016		Date		

Official Form 106Dec

Fill	in this inforn	nation to identify you	case:			4419
Deb	otor 1	Michele Y McCal	llum-Evans			
Dala		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Cas (if kn	se number _ own)				_	heck if this is an mended filing
Sta Be a info	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup v additional pages, write you	
	<u> </u>	,	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	it all of the places you li	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$50,854.87	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Michele Y McCallum-Evans Ca					Case	ase number (if known)						
					Debtor 1					Debtor 2		
					Sources	of income that apply.	(be	oss income fore deductions a clusions)	ınd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December :	31, 2015 )	■ Wages bonuses,	s, commissions, tips		\$82,658.	.55	☐ Wages, combonuses, tips	imissions,	
					☐ Operat	ing a business				☐ Operating a	business	
			lar year be December		■ Wages bonuses,	s, commissions, tips		\$77,853.	.98	☐ Wages, combonuses, tips	ımissions,	
					☐ Operat	ing a business				☐ Operating a	business	
		each s		he gross inco	-	nave income that y		_				
					Debtor 1					Debtor 2		
					Sources of Describe b		eac (be	oss income from th source fore deductions a clusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pa	yments You	Made Befo	re You Filed for	Bankr	uptcy				
6.	Are □	No.	Neither Deindividual puring the No. Yes	potential process of the line	personal, fare you filed accheditor. Do n payments to to 4/01/19 ar both have re you filed accheditor.	amily, or household for bankruptcy, di r to whom you pai ot include paymer of an attorney for the and every 3 years or bankruptcy, di r to whom you pai	d you d a tot ts for nis bar s after d you d a tot	lebts. Consumer cose."  pay any creditor a al of \$6,425* or m domestic support akruptcy case. that for cases file lebts.  pay any creditor a al of \$600 or more	a total of nore in obligated on o	of \$6,425* or more pay tions, such as cher after the date of \$600 or more?	re?  ments and the support and	
				attorney for			gain		Сарро	•		aa paymonto to un
	Cre	ditor's	s Name and	d Address		Dates of payme	nt	Total amour pai		Amount you still owe	Was this p	ayment for

De	btor 1 Michele Y McCallum-Evans		Case number (if known)						
7.	Within 1 year before you filed for bankrup: Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gon control, or owner of 20%	eneral partners; partners or more of their votin	erships of which yog g securities; and a	u are a genera ny managing a	ll partner; corporations gent, including one for			
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ayments or transfer a	any property on a	ccount of a de	ebt that benefited an			
	■ No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name			
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address			oreclosed, garnis	shed, attached	l, seized, or levied?  Value of the			
		Explain what happen	ed			property			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed  No  Yes. Fill in the details.	ptcy, did any creditor, ir	ncluding a bank or fir	nancial institutior	, set off any a	mounts from your			
	Creditor Name and Address	Describe the action t	he creditor took	Date taker	action was	Amount			
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a No Yes		perty in the possess	ion of an assigne	e for the bene	fit of creditors, a			
Pa	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankru	otcy, did you give any g	ifts with a total value	of more than \$60	0 per person?	•			
	<ul> <li>Yes. Fill in the details for each gift.</li> <li>Gifts with a total value of more than \$600 per person</li> </ul>	Describe the gift	ts	Dates the g	s you gave	Value			
	Person to Whom You Gave the Gift and Address:			uie y					

Official Form 107

Deb	tor 1 Michele Y McCallum-Evans			Case number	(if known)							
	Within 2 years before you filed for bank	ruptcy,	did you give any gifts or contribution	ns with a tota	al value of more than	\$600 to any charity?						
	No		:									
	Yes. Fill in the details for each gift or				Dates you	Value						
	Gifts or contributions to charities that more than \$600	totai	Describe what you contributed		Dates you contributed	value						
	Charity's Name											
	Address (Number, Street, City, State and ZIP Coo	de)										
Part	6: List Certain Losses											
	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?											
	■ No											
	Yes. Fill in the details.											
	Describe the property you lost and	Descr	ibe any insurance coverage for the I	oss	Date of your	Value of property						
	how the loss occurred		e the amount that insurance has paid.		loss	lost						
		insura	nce claims on line 33 of Schedule A/B:	Property.								
Part	7: List Certain Payments or Transfer	·s										
16	Within 1 year before you filed for bankro	untou d		r bobolf nov	or transfer only prope	why to only one you						
	consulted about seeking bankruptcy or			i benan pay	or transfer any proper	ity to arryone you						
	Include any attorneys, bankruptcy petition	preparer	s, or credit counseling agencies for se	rvices require	d in your bankruptcy.							
	□ No											
	Yes. Fill in the details.											
	Person Who Was Paid		Description and value of any prop	ortv	Date payment	Amount of						
	Address		transferred	City	or transfer was	payment						
	Email or website address	Vau			made							
	Person Who Made the Payment, if Not Ronald D. Weiss P.C.	Tou	\$2970 including \$2500 logal fo	o \$210		\$0.00						
	734 Walt Whitman Road		\$2870 including \$2500 legal fe filing fee, \$35 credit counseling			<b>\$0.00</b>						
	Suite 203		credit report fee	<b>3</b> , +								
	Melville, NY 11747											
	Within 1 year before you filed for bankro				or transfer any prope	rty to anyone who						
	promised to help you deal with your cre Do not include any payment or transfer that			rs?								
	Do not morado any payment of transfer the	it you no	iod on line to.									
	■ No											
	☐ Yes. Fill in the details.											
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of						
	Address		transferred		or transfer was made	payment						
	Within 2 years before you filed for bank transferred in the ordinary course of yo			sfer any pro	perty to anyone, other	r than property						
	Include both outright transfers and transfer			ecurity intere	st or mortgage on your	property). Do not						
	include gifts and transfers that you have al	ready lis	ted on this statement.									
	No											
	Yes. Fill in the details.											
	Person Who Received Transfer		Description and value of		any property or	Date transfer was						
	Address		property transferred	payments	s received or debts xchange	made						
	Person's relationship to you				J							

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Debtor 1	Michele	Υ	McCallum-Evans
DODIOI I	MILCITCIC	•	Wiccallulli-Lvalls

Case number (if known)

	<ul><li>beneficiary? (These are often called asset-pro</li><li>No</li><li>Yes. Fill in the details.</li></ul>	tection devices.)								
Name of trust		Description and v	Date Transfer was made							
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Uni	its					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	• • • • • • • • • • • • • • • • • • • •		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
	cash, or other valuables?									
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?				
Par	t 9: Identify Property You Hold or Control	for Someone Else								
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No									
	Yes. Fill in the details.	100	. •							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		(Number, Street, City, State and ZIP		the property	Value				
Par	t 10: Give Details About Environmental Info	ormation								
For	the purpose of Part 10, the following definition	ons apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property to own, operate, or utilize it, including dispo	law, whether you now own, operate, or utilize it or used								
	_									
Rep	ort all notices, releases, and proceedings tha	at you know about, rega	ardless of whe	n they occ	urred.					

Debtor 1	Michele	Υ	McCallum-Evans

Case number (if known)

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	un	der or in violation of an environm	ental law?				
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous material?							
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any envi	iron	mental law? Include settlements a	and orders.				
		No Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business							
27.	Witl	hin 4 years before you filed for bankrupto	cy, did you own a business or have an	ny of	f the following connections to any	business?				
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		An owner of at least 5% of the voting	or equity securities of a corporation							
		No. None of the above applies. Go to P	art 12.							
		Yes. Check all that apply above and fill	in the details below for each business	S.						
		siness Name dress	Describe the nature of the business		Employer Identification numbe Do not include Social Security					
	(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed					
28.		nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement t	to a	nyone about your business? Inclu	ide all financial				
		No Yes. Fill in the details below.								
		me dress mber, Street, City, State and ZIP Code)	Date Issued							
	,									

Case 8-16-74560-las Doc 1 Filed 10/01/16 Entered 10/01/16 13:05:28

Debtor	Michele Y McCallum-Evans	Case number (if known)
Part 12	2: Sign Below	
are true with a l		ffairs and any attachments, and I declare under penalty of perjury that the answers tement, concealing property, or obtaining money or property by fraud in connection, or imprisonment for up to 20 years, or both.
/s/ Mic	chele Y McCallum-Evans	
	ele Y McCallum-Evans eure of Debtor 1	Signature of Debtor 2
Date	September 26, 2016	Date
Did you ■ No □ Yes	attach additional pages to Your Statement of Fin	ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you ■ No	ı pay or agree to pay someone who is not an attor	ney to help you fill out bankruptcy forms?
☐ Yes.	Name of Person Attach the Bankruptcy Petit	ion Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
Debtor 1	Michele Y McCallum	-Evans					
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the:	Eastern District of New York					
Case number (if known)							

	4418								
Check	Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:									
☐ 1. Disposable income is not determined 11 U.S.C. § 1325(b)(3).									
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								
	Check if this is an amended filing								

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	t 1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
1 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tot pouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	d be March 1 throusult. Do not includ	ıgh Aug le any iı	ust 31. If the amo	ount of your monthly incom ore than once. For examp	e varied during le, if both
					Colun		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (before all	\$	7,321.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	r <b>t.</b> Include ld, your c	e regula depende	r contributions ents, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

			Column A Debtor 1		Column B Debtor 2 o	
7. <b>I</b> n	terest, dividends, and royalties		\$	0.00	\$	
	nemployment compensation		\$	0.00	\$	
	o not enter the amount if you contend that the amount received ve Social Security Act. Instead, list it here:	vas a benefit unde	er			
	For you\$	0.00				
	For your spouse \$					
	ension or retirement income. Do not include any amount receivenefit under the Social Security Act.	ved that was a	\$	0.00	\$	
Do red do	come from all other sources not listed above. Specify the sounce not include any benefits received under the Social Security Actorived as a victim of a war crime, a crime against humanity, or in mestic terrorism. If necessary, list other sources on a separate pal below.	t or payments nternational or				
			\$	0.00	\$	
			\$	0.00	\$	
	Total amounts from separate pages, if any.	4	<b>.</b> \$	0.00	\$	
	alculate your total average monthly income. Add lines 2 throuch column. Then add the total for Column A to the total for Column		7,321.00	+ \$_		= \$7,321.00
12. <b>C</b> c 13. <b>C</b> c	opy your total average monthly income from line 11.					\$
_	•					
	You are married and your spouse is filing with you. Fill in 0 be	elow.				
	You are married and your spouse is not filing with you.					
	Fill in the amount of the income listed in line 11, Column B, th dependents, such as payment of the spouse's tax liability or t					
	Below, specify the basis for excluding this income and the am adjustments on a separate page.	nount of income de	evoted to each	n purpose	. If necessary	, list additional
	If this adjustment does not apply, enter 0 below.	•				
		\$ \$		_		
	-					
	Total	\$	0.0	0Co	py here=>	- 0.00
14. <b>Y</b>	our current monthly income. Subtract line 13 from line 12.					\$
15. <b>C</b>	calculate your current monthly income for the year. Follow the	hese steps:				
1	5a. Copy line 14 here=>					\$7,321.00
	Multiply line 15a by 12 (the number of months in a year).					<b>x</b> 12
1	5b. The result is your current monthly income for the year for the	his part of the forn	n			\$87,852.00

Michele Y McCallum-Evans

Debtor 1

Debt	or 1	Mich	ele Y McCallum-Evans		Case number (if known)		
16	. Cal	culate t	the median family income that applies to y	ou. Follow these	steps:		
	16a	. Fill in t	the state in which you live.	NY			
	16h	Fill in t	the number of people in your household.	1			
			the median family income for your state and		<u> </u>	<b>c</b>	49,086.00
	100	To find	d a list of applicable median income amounts	, go online using	the link specified in the separate	Φ	
17	. Uas		ctions for this form. This list may also be avai	lable at the bank	ruptcy clerk's office.		
17	. <b>по</b> ч	_	e lines compare?  Line 15b is less than or equal to line 16c. C	in the ten of page	1 of this form shock box 1. Disposable in	como is not c	latarminad undar
	17 a	_	11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N	OT fill out Calcul	ation of Your Disposable Income (Official F	orm 122C-2)	
	17b	. •	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	lation of Your D			
Par	t 3:	Calc	culate Your Commitment Period Under 11	U.S.C. § 1325(b)	(4)		
18.	Cop	y your	total average monthly income from line 1	1.		\$	7,321.00
19.	con	tend tha	e marital adjustment if it applies. If you are at calculating the commitment period under 1 come, copy the amount from line 13.	married, your sp 1 U.S.C. § 1325(	ouse is not filing with you, and you b)(4) allows you to deduct part of your		
	19a	. If the r	marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$	0.00
	19b	Subtra	act line 19a from line 18.			\$	7,321.00
20.	Cal	culate y	your current monthly income for the year.	Follow these ste	eps:	<u> </u>	
	20a	. Copy	line 19b			\$	7,321.00
		Multip	ly by 12 (the number of months in a year).			X	12
	20b	. The re	esult is your current monthly income for the y	ear for this part of	f the form	\$	87,852.00
	20c	Copy	the median family income for your state and	size of household	I from line 16c	\$	49,086.00
	21.	How o	do the lines compare?				
			ine 20b is less than line 20c. Unless otherwineriod is 3 years. Go to Part 4.	se ordered by the	court, on the top of page 1 of this form, ch	neck box 3, Ti	he commitment
			ine 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	less otherwise or	dered by the court, on the top of page 1 of	this form, che	eck box 4, The
Par	t 4:	Sigr	n Below				
	By s	signing	here, under penalty of perjury I declare that t	he information or	this statement and in any attachments is	true and corre	ect.
)	X /s/	Miche	ele Y McCallum-Evans				
-	Mi	chele	Y McCallum-Evans				
			of Debtor 1				
	Dale		tember 26, 2016 ODD / YYYY				
	If yo	u checl	ked 17a, do NOT fill out or file Form 122C-2.				
	If yo	u checl	ked 17b, fill out Form 122C-2 and file it with t	his form. On line	39 of that form, copy your current monthly	income from	line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

								4419
Fill in t	his information to	identify you	r case:					
Debtor	1 Michele \	/ McCallum	-Evans					
Debtor	2							
(Spouse	e, if filing)							
United \$	States Bankruptcy C	ourt for the:	Eastern District of	New York				
Case no					☐ Cho	eck if this is a	an amended	filing
	Form 122C-2							
Chap	oter 13 Cal	culation	n of Your D	Disposable I	ncome			04/16
Commit Be as co	ment Period (Officions)	ial Form 122 ate as possil	C-1). Die. If two married	people are filing toge	ent of Your Current Mont ether, both are equally re r to which additional info	sponsible for	being accura	ate. If more
addition	nal pages, write you 	ır name and	case number (if ki	nown).				
Part 1:	Calculate Your	Deductions	from Your Income	е				
the q		-15. To find	the IRS standards,	go online using the	or certain expense amour link specified in the sepa			
expe	nses if they are high	er than the s	tandards. Do not inc	clude any operating ex	ense. In later parts of the for epenses that you subtracted s income in line 13 of Form	from income		
If you	ır expenses differ fro	om month to r	month, enter the ave	erage expense.				
Note	: Line numbers 1-4 a	are not used i	n this form. These r	numbers apply to infor	mation required by a simila	r form used in	chapter 7 cas	ses.
5.	The number of peo	ple used in	determining your	deductions from inco	ome			
		any additiona	dependents whom		ederal income tax return, nber may be different from		1	
Natio	onal Standards	You mu	st use the IRS Nation	onal Standards to ans	wer the questions in lines 6	i-7.		
	Food, clothing, and Standards, fill in the				d in line 5 and the IRS Nati	onal	\$	570.00
	the dollar amount fo people who are 65 o	r out-of-pock or olderbeca	et health care. The lause older people ha	number of people is sp	ntered in line 5 and the IRS olit into two categoriespeo rance for health car costs. I	ple who are ur	nder 65 and	

Official Form 22C-2

ebtor 1	N	lichele Y McCallum-Evans				Case number (if kn	own)			
Peop	le w	who are under 65 years of age								
7	₹a.	Out-of-pocket health care allowance per person	\$	54						
7	7b.	Number of people who are under 65	X	1						
7	7c.	Subtotal. Multiply line 7a by line 7b.	\$	54.00		Copy here=>	\$_	54.00		
Peop	le w	vho are 65 years of age or older								
7	٦d.	Out-of-pocket health care allowance per person	\$	130						
7	7е.	Number of people who are 65 or older	x _	0						
7	7f.	Subtotal. Multiply line 7d by line 7e.	\$_	0.00		Copy here=>	\$_	0.00		
7	₹g.	Total. Add line 7c and line 7f		\$		54.00	C	opy total here=>	\$	54.00
Local	Sta	andards You must use the IRS Local Standards to	n answ	er the guestions	s in line	os 8-15				
Base	d oı	n information from the IRS, the U.S. Trustee Prog		•			for h	ousing for		
_	-	tcy purposes into two parts:								
_		ing and utilities - Insurance and operating expen	ses							
		ing and utilities - Mortgage or rent expenses								
separ 8. I	ate Iou	er the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experted the dollar amount listed for your county for insurance	e avai enses:	lable at the bar Using the numb	n <b>krupt</b> oper of p	cy clerk's offic	e.			574.00
9. <b>I</b>	Hou	ising and utilities - Mortgage or rent expenses:								
(	a.	Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense		e dollar amount			\$_	1,920.00		
ç	9b.	Total average monthly payment for all mortgages a	nd oth	er debts secure	d by yo	our home.				
		To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.								
		Name of the creditor		Average month payment	nly					
		Specialized Loan Servicing - SLS		\$ 2,660	0.00					
		9b. Total average monthly paymer	nt	\$ 2,660	0.00	Copy here=> -\$	S	2,660.00	Repeat on line 3	this amount 33a.
ę	Эс.	Net mortgage or rent expense.	L							
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		e 9a ( <i>mortgage</i>		\$	O	0.00 Copy here=>	\$	0.00
-	•	ou claim that the U.S. Trustee Program's division cts the calculation of your monthly expenses, fil				•	inco	rrect and	\$	0.00

Debtor 1	Michele Y McCallum-Evans		Case number (if k	nown)		
11.	Local transportation expenses: Check the number of vehic	les for which you claim	an ownership	or operating	expense.	
	☐ 0. Go to line 14.					
	■ 1. Go to line 12.					
	☐ 2 or more. Go to line 12.					
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for y					308.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1:					
13a	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1.					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
					Popost this	
	Total Average Monthly Payment	\$	Copy here => -\$		Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense				Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0,	, enter \$0	. \$	0.00	Vehicle 1 expense here => \$	0.00
Ve	hicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs for	r			
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
			Сору		Repeat this	
	Total average monthly payment	\$	here => -\$	0.0	amount on line	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0,	, enter \$0	\$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v				n the	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	or more vehicles in line hat you believe is the ap	e 11 and if you	claim that y		173.00

Case number (if known)

Oth	or Necessary Evpenses In (	addition to the evenes de	aduatio	as listed shows	, you are allowed your monthly expense	o for	
Oth	•	following IRS categories		is listed above,	, you are allowed your monthly expense	\$ 101	
16.	self-employment taxes, social s	security taxes, and Medica ver, if you expect to recei	are taxe ve a tax	es. You may inc x refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes		
	Do not include real estate, sale	\$	2,183.00				
17.	<b>Involuntary deductions:</b> The contributions, union dues, and		450.07				
	Do not include amounts that are	e not required by your job	, such a	as voluntary 40	1(k) contributions or payroll savings.	\$	159.37
18.	filing together, include payment	s that you make for your e insurance on your depe	spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	43.15
19.	Court-ordered payments: The administrative agency, such as				by the order of a court or		
					You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly a	amount that you pay for e	ducatio	n that is either i	required:		
	as a condition for your job, o				·		
	for your physically or mental	lly challenged dependent	child if	no public educa	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly a	mount that you pay for ch	ildcare	such as babys	sitting, daycare, nursery, and preschool.		0.00
	Do not include payments for an	y elementary or seconda	ry scho	ol education.		\$	0.00
22.		nd welfare of you or your clude only the amount the	depend at is mo	lents and that is re than the tota		\$	0.00
23.	for you and your dependents, s phone service, to the extent ne income, if it is not reimbursed b	uch as pagers, call waitin cessary for your health ar y your employer.	g, calle nd welfa	r identification, are or that of yo	you pay for telecommunication services special long distance, or business cell our dependents or for the production of t		0.00
	expenses, such as those report					+\$	0.00
24.	Add all of the expenses allow Add lines 6 through 23.	ved under the IRS exper	ise allo	wances.		\$	4,064.52
Add	itional Expense Deductions	These are additional de Note: Do not include ar					
25.	Health insurance, disability in	nsurance, and health sa	vinas a	account expen	ses. The monthly expenses for health		
					ly necessary for yourself, your spouse,	or	
	Health insurance		\$	0.00			
	Disability insurance		\$	55.36			
	Health savings account	+	\$	130.31			
	Total		\$	185.67	Copy total here=>	\$	185.67
	Do you got wells, around this total	Lamaunt?					
	Do you actually spend this total  No. How much do you a						
	Yes	actually openia.	\$				
26.	Continued contributions to the continue to pay for the reasona	ble and necessary care a our immediate family who	nd sup is una	port of an elder ble to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	f \$	0.00
27.	Protection against family viol	l <b>ence.</b> The reasonably ne	cessar	y monthly expe	nses that you incur to maintain the	<b>-</b>	
	safety of you and your family un By law, the court must keep the	•			es Act or other federal laws that apply.	\$	0.00

Michele Y McCallum-Evans

Debtor 1

ebtor 1	Michele Y McCallum-Evans	Case	number (if known)				
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	and operating ex	penses on			
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy costs nergy costs	s included in expe	enses on lir	ie		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must sl	now that the addit	ional	\$_	0.00	
,		Iren who are younger than 18. The monthly ependent children who are younger than 18 years					
	You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.						
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after	er the date of adju	ıstment.	\$	0.00	
		he monthly amount by which your actual food a lallowances in the IRS National Standards. The in the IRS National Standards.					
		ional allowance, go online using the link specif so be available at the bankruptcy clerk's office.		e			
	You must show that the additional amount	claimed is reasonable and necessary.			\$_	19.00	
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in inization. 11 U.S.C. § 548(d)(3) and (4).	the form of cash of	or financial			
	Do not include any amount more than 15%	of your gross monthly income.			\$_	0.00	
	Add all of the additional expense deduct Add lines 25 through 31.	tions.			\$	204.67	
Dedu	uctions for Debt Payment						
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home n 33a through 33e.	nortgages, vehic	le			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secured				
	Mortgages on your home				Avera	ge monthly	
33a.	Copy line 9b here			=>	\$	2,660.00	
000.	Loans on your first two vehicles				<b>—</b>	2,000.00	
33b.	•			=>	\$	0.00	
33c.	O l' 40 h			=>	•	0.00	
					Ψ	0.00	
33d.	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt	includ	payment e taxes urance?			
				No			
	-NONE-			es/es	\$		
				No			
			_	′es	\$		
				No	· —		
			_ `	es +	¢		
					\$		
33e	Total average monthly payment. Add lines	s 33a through 33d	\$ 2,660.	Cop total here		2,660.00	

Debtor 1	Mich	nele Y McCallum-Evans			Case	e number (if known)		
c	or other	debts that you listed in lin property necessary for yo				,		
	_	Go to line 35.						
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ssession of your property (					
Nan	ne of the	creditor	Identify property that sec	ures the del	ot	Total cure amount	Month amour	
Sp.		ed Loan Servicing -	21 S. 32rd Street Wy 11798 Suffolk Coun Property owned joir father	nty ntly with [	Debtor's		÷ 60 = \$ ÷ 60 = \$ ÷ 60 = +\$	183.00
							Сору	
					Total	s 183.00	total	183.00
						<u> </u>		
a	are past	owe any priority claims - s due as of the filing date o Go to line 36.	f your bankruptcy case?	11 U.S.C. §	507.	aı		
•	Yes.	Fill in the total amount of a ongoing priority claims, sur			de current or			
			lue priority claims		:	\$ 1,902.00	÷60 \$	31.70
36. <b>F</b>	Projecte	d monthly Chapter 13 plar				\$		
ti T	Office of he Exec To find a l	multiplier for your district as a the United States Courts (for utive Office for United State ist of district multipliers that inclunstructions for this form. This lis	or districts in Alabama and I s Trustees (for all other dist udes your district, go online usi	North Carol tricts). ng the link sp	ina) or by pecified in the	x	Copy total	
P	Average	monthly administrative expe	ense			\$	here=> \$	
		of the deductions for deb es 33e through 36.	t payment.				\$_	2,874.70
Tota	l Deduc	ctions from Income						
38. <b>/</b>	Add all o	of the allowed deductions.						
		ne 24, All of the expenses all e allowances		\$	4,064.52	_		
	Copy lir	ne 32, All of the additional ex	xpense deductions	\$	204.67	_		
	Copy lir	ne 37, All of the deductions i	for debt payment	+\$	2,874.70	-		
								7,143.89

ebtor 1 IVII	cnele i wick	Callum-Evans		Case	number ( <i>if known</i> )			
art 2: D	Determine You	ur Disposable Income Under	11 U.S.C. § 1325(b)(	(2)				
		rrent monthly income from lin Current Monthly Income and				\$		7,321.00
<b>childre</b> disabili receive	en. The month ity payments f ed in accordar	bly necessary income you rec ally average of any child support for a dependent child, reported in the with applicable nonbankrup ended for such child.	t payments, foster ca in Part I of Form 1220	re payments, or C-1, that you	\$	0.00		
employ in 11 U	yer withheld fro J.S.C. § 541(b)	retirement deductions. The moom wages as contributions for contributions for contributions all required repayment 2. § 362(b)(19).	qualified retirement p	lans, as specified	\$	0.00		
42. Total o	of all deduction	ons allowed under 11 U.S.C. §	3 707(b)(2)(A). Copy	line 38 here=>	\$	7,143.89		
expens their ex	ses and you haxpenses. You	cial circumstances. If special cave no reasonable alternative, must give your case trustee a colocumentation for the expenses	describe the special detailed explanation d	circumstances and				
Describe t	the special ci	ircumstances		Amount of exper	ise			
			\$	i				
			\$	·				
			\$		<del></del>			
			Total \$	0.00	Copy here=>\$		0.00	
44. Total a	adjustments.	Add lines 40 through 43.		=> \$	7,143	.89 Co	py re=> <b>-</b> \$	7,143.89
		nthly disposable income unde	er § 1325(b)(2). Subt	ract line 44 from lir	e 39.		\$	177.11
46. <b>Chang</b> have cl time you	ge in income of thanged or are our case will be ded your petition	or expenses. If the income in Fe virtually certain to change afte e open, fill in the information ben, check 122C-1 in the first coluin when the increase occurred.	r the date you filed you blow. For example, if umn, enter line 2 in th	our bankruptcy pet the wages reported the second column,	tion and durin	g the ter		
Form	Line	Reason for change		Date of change	Increase decrease		mount of chang	9
☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-1					☐ Increas ☐ Decreas ☐ Decreas ☐ Decreas ☐ Decreas ☐ Decreas	se \$ se \$ se \$ se \$ se \$		_

Case 8-16-74560-las Doc 1 Filed 10/01/16 Entered 10/01/16 13:05:28

Debtor 1	Michele Y McCallum-Evans	Case number (if known)	
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.	
.,	//W: 1 1 VM O II - 5		
X	/s/ Michele Y McCallum-Evans		
	Michele Y McCallum-Evans		
	Signature of Debtor 1		
Date	September 26, 2016		
	MM / DD / YYYY		

Official Form 122C-2

Debtor 1 Michele Y McCallum-Evans Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 04/01/2016 to 09/30/2016.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Valley Medical Group

Income by Month:

6 Months Ago:	04/2016	\$7,321.00
5 Months Ago:	05/2016	\$7,321.00
4 Months Ago:	06/2016	\$7,321.00
3 Months Ago:	07/2016	\$7,321.00
2 Months Ago:	08/2016	\$7,321.00
Last Month:	09/2016	\$7,321.00
	Average per month:	\$7,321.00

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**

1	1	1	a

Ea	stern District of New Yo	rk	
re Michele Y McCallum-Evans		Case No.	
	Debtor(s)	Chapter	13
DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR DI	EBTOR(S)
compensation paid to me within one year before the fi	lling of the petition in bankruptcy	y, or agreed to be paid	I to me, for services rendered or to
For legal services, I have agreed to accept		\$	4,500.00
Prior to the filing of this statement I have receive	ed	\$	2,500.00
			2,000.00
\$310.00 of the filing fee has been paid.			
The source of the compensation paid to me was:			
■ Debtor □ Other (specify):			
The source of compensation to be paid to me is:			
	suant to retainer, through C	hapter 13 plan	
■ I have not agreed to share the above-disclosed con	mpensation with any other person	n unless they are mem	nbers and associates of my law firm
copy of the agreement, together with a list of the	names of the people sharing in th	ne compensation is atta	ached.
<ul> <li>b. Preparation and filing of any petition, schedules, s</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. Representation of the debtor in adversary proceeding</li> <li>e. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications</li> </ul>	tatement of affairs and plan which litors and confirmation hearing, sings and other contested bankrup or reduce to market value; ex- tions as needed; preparatio	ch may be required; and any adjourned hea otcy matters; emption planning on and filing of mot	rings thereof; ; preparation and filing of ions pursuant to 11 USC
Representation of the debtors in any	dischargeability actions, jud		es, relief from stay actions or
	CERTIFICATION		
I certify that the foregoing is a complete statement of s bankruptcy proceeding.	any agreement or arrangement for	or payment to me for i	representation of the debtor(s) in
September 26, 2016	/s/ Ronald D. We	eiss	
Date			
	Suite 203	47	
			4
			7
	Name of law firm		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation. For legal services, I have agreed to accept. Prior to the filling of this statement I have received Balance Due.  \$ 310.00 of the filling fee has been paid.  The source of the compensation paid to me was:  Debtor Other (specify):  The source of compensation to be paid to me is:  Debtor Other (specify):  Pursuant to 11 have agreed to share the above-disclosed compecopy of the agreement, together with a list of the In return for the above-disclosed fee, I have agreed to a. Analysis of the debtor's financial situation, and refully be preparation and filing of any petition, schedules, so c. Representation of the debtor at the meeting of creed. Representation of the debtor at the meeting of creed. Representation agreements and applications with secured creditors to reaffirmation agreements and applications of the debtor's in any of the agreement with the debtor's, the above-disclosed Representation of the debtors in any of the adversary proceeding or applications with the debtor's in any of the adversary proceeding or application of the debtor of the debtor's in any of the adversary proceeding or applications of the debtor's in any of the adversary proceeding or application of the debtor's in any of the debtor's that the foregoing is a complete statement of stankruptcy proceeding.	Debtor(s)  DISCLOSURE OF COMPENSATION OF ATTO  Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the atto compensation paid to me within one year before the filing of the petition in bankrupic be rendered on behalf of the debtor(s) in contemplation of or in connection with the be rendered on behalf of the debtor(s) in contemplation of or in connection with the before rendered on behalf of the debtor(s) in contemplation of or in connection with the before rendered on behalf of the debtor(s) in contemplation of or in connection with the before received.  Balance Due  \$ 310.00 of the filing fee has been paid.  The source of the compensation paid to me was:  Debtor Other (specify):  Pursuant to retainer, through Compensation of the debtor of the above-disclosed compensation with any other persons copy of the agreement, together with a list of the names of the people sharing in the Intertum for the above-disclosed fee, I have agreed to render legal service for all aspeat.  Analysis of the debtor's financial situation, and rendering advice to the debtor in debtor. Representation of the debtor in adversary proceedings and other contested bankrupe. (Other provisions as needed)  Negotiations with secured creditors to reduce to market value; experimentation agreements and applications as needed; preparation of the debtor in adversary proceedings and other contested bankrupe. (Other provisions as needed)  By agreement with the debtor(s), the above-disclosed fee does not include the following any other adversary proceeding or appeal.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for shankrupticy proceeding.  September 26, 2016  Date  Pate  Pate Michael Y McCall D. Weiss Signature of Attorn Ronald D. Weiss Signature of Attorn Ron	Disclosure of Compensation paid to me within one year before the filing of the petition in bankruptey, or agreed to be paid be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptey case is as for For legal services, I have agreed to accept  Prior to the filing of this statement I have received  Salance Due  Salance

## United States Bankruptcy Court

4419

**Eastern District of New York** 

In re	Michele Y McCallum-Evans		Case No.	
•		Debtor(s)	Chapter	13

## **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: September 26, 2016

| September 26, 2016 | September 26, 2016 | September 26, 2016 | September 26, 2016 | September 26, 2016 | Signature of Attorney Ronald D. Weiss 4419 Ronald D. Weiss, P.C.

Ronald D. Weiss 4419
Ronald D. Weiss, P.C.
734 Walt Whitman Road
Suite 203
Melville, NY 11747

(631) 271-3737 Fax: (631) 271-3784

USBC-44 Rev. 9/17/98

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

NYS Dept of Taxation & Finance Bankruptcy Unit-TCD Bldg 8 Room 455 W. A Harriman State Campus Albany, NY 12227

United States Attorney Attn: Chief of Bankruptcy Litigation One Pierrepont Plaza 4th Floor Brooklyn, NY 11201

US Department of Justice Tax Division Box 55 Ben Franklin Station Washington, DC 20044

State of New York Office of the Attorney General 120 Broadway New York, NY 10271

Capital One Automobile Financing 3901 North Dallas Tollway Dallas, TX 75093

Chase Bank USA NA 201 N. Walnut Street Wilmington, DE 19801

Dept of Ed/ Navient PO Box 9655 Wilkes Barre, PA 18773

Enhanced Recovery Co. 8014 Bayberry Rd Jacksonville, FL 32256

IC Systems Inc PO Box 64378 Saint Paul, MN 55164 MRC Receivables Corp c/o Selip & Stlianou fka Cohen & Slamowitz, LLP PO Box 9012 Woodbury, NY 11797-9012

New York Telephone Co. c/o William Weiss 375 Pearl Street, Rm 1208 New York, NY 10038

NYS Commissioner Tax & Finance Civil Enforcement WA Harriman State Campus Albany, NY 12227-0001

PC Richards/GEMB PO Box 981439 El Paso, TX 79998-1439

Portfolio Recovery Associates 120 Corporate Blvd. Suite 100 Norfolk, VA 23502

Specialized Loan Servicing - SLS Lucent Blvd., Suite 300 Highlands Ranch, CO 80129 Case 8-16-74560-las Doc 1 Filed 10/01/16 Entered 10/01/16 13:05:28

## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

## STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]
NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:
1. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
2. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
3. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:

 $DEBTOR(S): \quad \text{Michele Y McCallum-Evans}$ 

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer	to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDUI SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	als who have had prior cases dismissed within the preceding 180 days may not uired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S A	ATTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New	York (Y/N):Y
I certify under penalty of perjury that the within bankrup as indicated elsewhere on this form.  /s/ Ronald D. Weiss	otcy case is not related to any case now pending or pending at any time, except
Ronald D. Weiss 4419 Signature of Debtor's Attorney Ronald D. Weiss, P.C. 734 Walt Whitman Road	Signature of Pro Se Debtor/Petitioner
Suite 203 Melville, NY 11747 (631) 271-3737 Fax:(631) 271-3784	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Tailon to fully and touthfully annuity all information	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17